The Commonwealth of Massachusetts
Executive Office of Health and Human Services
Department of Public Health
Division of Health Professions Licensure
Board of Registration in Nursing
239 Causeway Street, Suite 200, 2nd Floor, Boston, MA 02114
617-973-0800
www.mass.gov/dph/boards/rn

MITT ROMNEY
GOVERNOR

KERRY HEALEY
LIEUTENANT GOVERNOR

TIMOTHY R. MURPHY
SECRETARY

PAUL J. COTE, JR.
COMMISSIONER

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PRACTICAL NURSE LICENSURE BY RECIPROCITY OR EXAMINATION

**Determination of Eligibility for Practical Nurse Reciprocity or
to Write the NCLEX-PN by Former RN Student Withdrawn in Good Standing**
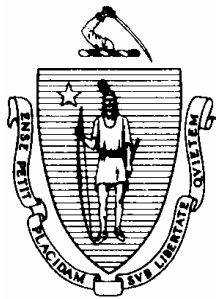
APPLICATION INSTRUCTION SHEET

ELIGIBILITY CRITERIA (General Law, Chapter 112, section 74A):
The eligible licensed PN seeking reciprocity or NCLEX-PN applicant must complete, at the time of official withdrawal from a professional nursing program, a program of study equivalent to that required for graduation from an approved practical nurse program. Practical Nurse program requirements include completion of a minimum of 945 hours in theoretical and clinical practice in medical, surgical, pediatric, and obstetrical, as well as mental health nursing concepts, of which a minimum of 540 hours will be allocated to clinical practice. Both the theoretical and clinical components of a clinical nursing course must be successfully completed at the time of withdrawal.

Board policy requires the completion of all course work a minimum of five years prior to submitting a completed application for Determination of Eligibility for Practical Nurse Reciprocity or to Write the NCLEX-PN by Former RN Student Withdrawn in Good Standing.

DIRECTIONS:

1. Applicant to complete application for Determination of Eligibility for Practical Nurse Reciprocity or to Write the NCLEX-PN by Former RN Student Withdrawn in Good Standing.

2. Nursing education program must submit the following documentation:
    a. Official transcript;
    b. Statement, including dates student entered and withdrew, verifying student has officially withdrew in good standing;
    c. Calculation of theory and clinical clock hours successfully completed by applicant during enrollment.
    d. Statement applicant successfully completed theory and clinical content in medical, surgical, pediatric, obstetrical and mental health nursing prior to withdrawal must be included.

3. Mail all documents to: Nursing Education Coordinator, Board of Registration in Nursing, at the above address.

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APPLICATION

TYPE or PRINT IN INK

Applicant Name: _____   Date of Birth: _____

_____

  Last   First   Middle Initial   Maiden

Mailing Address:

_____

  Street   Town/City   State   Zip

Telephone: _____   E-mail: _____

  Area Code/Number

Nursing Education Program from which you officially withdrew in good standing:

_____

Address: _____

Program type (check one):

Diploma_____ Associate Degree _____ Baccalaureate _____ Generic MSN _____

Date entered: _____   Date withdrawn: _____

Signature: _____ Date: _____

IMPORTANT NOTE:
The Board will issue a Certificate of PN Reciprocity Eligibility or NCLEX-PN Eligibility to applicants who meet the requirements at the mailing address provided above. The certificate of eligibility must be attached the Practical Nurse licensure by reciprocity application or to the Practical Nurse licensure by examination application in lieu of graduation certification. Eligibility must be granted before you submit a Practical Nurse licensure by reciprocity or examination application to the Board's testing service, Professional Credential Services, Inc. Ineligible applicants will be so notified in writing.